Characterizing Blast Exposure and mild TBI in OEF/OIF Veterans using the Boston Assessment of TBI-Lifetime

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The Boston Assessment of Traumatic **Brain Injury-Lifetime (BAT-L)** Semi-structured Interview: **Preliminary Evidence of Research Utility** and Validity

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Developed by TRACTS in conjunction with the Neuropsychology & Polytrauma clinical services at VA Boston

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The Boston Assessment of Traumatic Brain Injury–Lifetime (BAT-L) Semistructured Interview: Evidence of Research Utility and Validity

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Objective: Report the prevalence of lifetime and military-related traumatic brain injuries (TBIs) in Operation Enduring Freedom and Operation Iraqi Freedom (OEF/OIF) veterans and validate the Boston Assessment of TBI-Lifetime (BAT-L). Setting: The BAT-L is the first validated, postcombat, semistructured clinical interview to characterize head injuries and diagnose TBIs throughout the life span. Participants: Community-dwelling convenience sample of 131 OEF/OIF veterans. **Design:** TBI criteria (alteration of mental status, posttraumatic amnesia, and loss of consciousness) were evaluated for all possible TBIs, including a novel evaluation of blast exposure. Main Measures: BAT-L, Ohio State University TBI Identification Method (OSU-TBI-ID). Results: About 67% of veterans incurred a TBI in their lifetime. Almost 35% of veterans experienced at least 1 military related TBI; all were mild in severity, 40% of them were due to blast, 50% were due to some other (ie, blunt) mechanism, and 10% were due to both types of injuries. Predeployment TBIs were frequent (45% of veterans). There was strong correspondence between the BAT-L and the OSU-TBI-ID (Cohen $\kappa = 0.89$; Kendall τ -b = 0.95). Interrater reliability of the BAT-L was strong ($\kappa s > 0.80$). **Conclusions:** The BAT-L is a valid instrument with which to assess TBI across a service member's lifetime and captures the varied and complex nature of brain injuries across OEF/OIF veterans' life span. Key words: assessment, blast, OEF/OIF, traumatic brain injury (TBI), veterans

ILD TRAUMATIC BRAIN INJURY (mTBI) is the so-called signature injury of Operation

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To download the full BAT-L semi-structured clinical interview go to: http:// www.heartbrain.com/.

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Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF), yet its identification and diagnosis are controversial and fraught with challenges. Diagnosis of military-related mTBI in OEF/OIF veterans is complex and unique from the diagnosis of civilianacquired brain injuries in a number of ways. This is due to the novel mechanism of injury (exposure to blast(s) such as an improvised explosive device), the frequent co-occurrence of head injury and psychological trauma during the chaos of combat that make the determination of altered mental status (AMS) difficult, and the difficulty obtaining in-theater documentation of symptoms at the time of injury for determining the presence or absence of mTBI. Although in-theater documentation of injuries is improving in more recent years, for the majority of OEF/OIF veterans, injuries were

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mTBI

- Mild Traumatic Brain Injury (mTBI) is the "signature injury" of OEF/OIF
- Estimates suggest between 9-23 percent of OEF/OIF veterans suffer at least one mTBI during service

Assessment of mTBI

Diagnosis of military mTBI is complex and unique from the diagnosis of civilian acquired brain injury

- novel mechanism of injury (exposure to blast(s) such as IED)
- 2. co-occurrence of head injury and psychological trauma during combat
- 3. difficulty obtaining in-theater documentation of symptoms at the time of injury

Principle Cause of Combat-Related TBI

Improvised Explosive Devices (IEDs)









Secondary blast-induced neurotrauma (penetrating head injury)



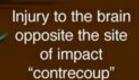
Primary blast-induced neurotrauma (without a direct blow to the head)



- kinetic energy transfer to the CNS
- lung injury- induced hypoxia/ischemia
- hemorrhage-induced hypoxia/ischemia
- hormones released from injured tissue

Tertiary blast mechanisms (i.e. effect of the impacts with other objects)





Secondary blast mechanisms
(i.e. effect of the missiles
being propelled by
blast force)

Primary blast mechanisms (i.e. effects of the blast wave itself)

Tertiary blast-induced neurotrauma (coup-contrecoup)

Assessment of mTBI

Limitations of existing measures:

- 1. Developed for civilian population
- 2. Military measures focus on combat injuries only
- 3. Designed to detect military TBI (not severity or duration of symptoms)
- 4. Frequent co-occurrence of TBI and stress/trauma necessitate a more refined assessment of head injury than previously required



BOSTON ASSESSMENT OF TBI – LIFETIME

BAT-L



Have you ever experienced a blow to the head?

Listed below are situations in which you may have experienced a blow to the head. For each event listed, please circle yes or no to indicate if you have experienced it. If yes, did you lose consciousness and/or were you dazed or confused as a result?

	# Did you experience this event		If you experienced the event					
#			Did you lose consciousness?		Were you dazed and confused?			
1	In a car crash?	Yes No	Yes	No	Unsure	Yes	No	Unsure
2	In a motorcycle crash?	Yes No	Yes	No	Unsure	Yes	No	Unsure
3	In an all-terrain vehicle crash?	Yes No	Yes	No	Unsure	Yes	No	Unsure
4	As a pedestrian hit by a vehicle?	Yes No	Yes	No	Unsure	Yes	No	Unsure
5	Being hit by a falling object?	Yes No	Yes	No	Unsure	Yes	No	Unsure
6	Being hit by equipment?	Yes No	Yes	No	Unsure	Yes	No	Unsure
7	Falling down stairs?	Yes No	Yes	No	Unsure	Yes	No	Unsure
8	Falling from a high place?	Yes No	Yes	No	Unsure	Yes	No	Unsure
9	During a fainting spell?	Yes No	Yes	No	Unsure	Yes	No	Unsure
10	During a drug or alcohol blackout?	Yes No	Yes	No	Unsure	Yes	No	Unsure
11	While biking?	Yes No	Yes	No	Unsure	Yes	No	Unsure
12	While roller blading/roller boarding?	Yes No	Yes	No	Unsure	Yes	No	Unsure
13	While horseback riding?	Yes No	Yes	No	Unsure	Yes	No	Unsure
14	While skiing?	Yes No	Yes	No	Unsure	Yes	No	Unsure
15	While sky diving?	Yes No	Yes	No	Unsure	Yes	No	Unsure
16	While participating in other sports? ex: football, hockey, baseball, basketball, soccer, lacrosse, boxing, wrestling, martial arts, etc.	Yes No	Yes	No	Unsure	Yes	No	Unsure
17	While on the playground?	Yes No	Yes	No	Unsure	Yes	No	Unsure
18	While diving into water?	Yes No	Yes	No	Unsure	Yes	No	Unsure
19	Being physically abused?	Yes No	Yes	No	Unsure	Yes	No	Unsure
20	While being assaulted or mugged?	Yes No	Yes	No	Unsure	Yes	No	Unsure
21	During a military or other training exercise?	Yes No	Yes	No	Unsure	Yes	No	Unsure
22	During combat?	Yes No	Yes	No	Unsure	Yes	No	Unsure
23	Other?	Yes No	Yes	No	Unsure	Yes	No	Unsure

BAT-L SUMMARY SCORE SHEET

MILITARY-RELATED BLAST:

Total # of Blast Exposures:		0 - 10 Meters	11 - 25 Meters		26 - 100 Meters		
Total # Blast T	Total # Blast TBIs:						
1 st Most Sever	<u>e</u>	2 nd Most Seve	re	3 rd Most Severe			
Age		Age		Age			
AMS	hr / min / sec	AMS	hr / min / sec	AMS	hr / min / sec		
PTA	hr / min / sec	РТА	hr / min / sec	PTA	hr / min / sec		
LOC	hr / min / sec	LOC	hr / min / sec	LOC	hr / min / sec		
Severity Mild Moderate Severe	If Mild: ☐ Stage ☐ Stage ☐ Stage	Severity Mild Moderate Severe	If Mild: ☐ Stage ☐ Stage ☐ Stage	Severity Mild Moderate Severe	If Mild: ☐ Stage ☐ Stage ☐ Stage		
BATL Score (0 – 5)		BATL Score (0 – 5)		BATL Score (0 – 5)			
Nature of Blast		Nature of Blas	t	Nature of Blas	t		
☐ Primary	(Head)	☐ Primary	(Head)	☐ Primary	(Head)		
☐ Secondary	(Head: ☐ Yes ☐ No)	☐ Secondary	(Head: ☐ Yes ☐ No)	☐ Secondary	(Head: ☐ Yes ☐ No)		
□ Tertiary□ Quaternary	(Head: ☐ Yes ☐ No) (Head: ☐ Yes ☐ No)	□ Tertiary□ Quaternary	(Head: ☐ Yes ☐ No) (Head: ☐ Yes ☐ No)	□ Tertiary□ Quaternary	(Head: ☐ Yes ☐ No) (Head: ☐ Yes ☐ No)		

BAT-L Assessment Approach

- TBI is assessed during 3 time epochs:
 - (1) Pre-Military
 - (2) Military
 - (3) Post-Military
- Evaluate 3 most severe injuries in each epoch
- Open-ended questioning & "Forensic Approach"
- Factors related to estimation of AMS queried
- Occurrence and duration of neurobehavioral symptoms following each injury recorded

TBI Severity is Rated According to DOD Criteria

Criteria	Mild	Moderate	Severe
Loss of Consciousness	0 - 30 minutes	>30 minutes and <24 hours	> 24 hours
Alteration of Mental Status	0 - 24 hours	>24 hours; severity b	ased on other criteria
Post Traumatic Amnesia	0 - 1 day	> 1 day and <7 days	> 7 days
Glascow Coma Scale	13 - 15	9 - 12	<9

Mild TBI Graded with Hybrid Classification

Criteria (must be > 0 for one of the following criteria)	Grade I	Grade II	Grade III
Loss of Consciousness	None	< 5 minutes	> 5 minutes
Post Traumatic Amnesia	0 - 15 minutes	<24 hours but >15 minutes	>24 hours
Alteration of Mental Status	0 - 15 minutes	<24 hours but >15 minutes	>24 hours

Developed from Bailes & Cantu, 2001

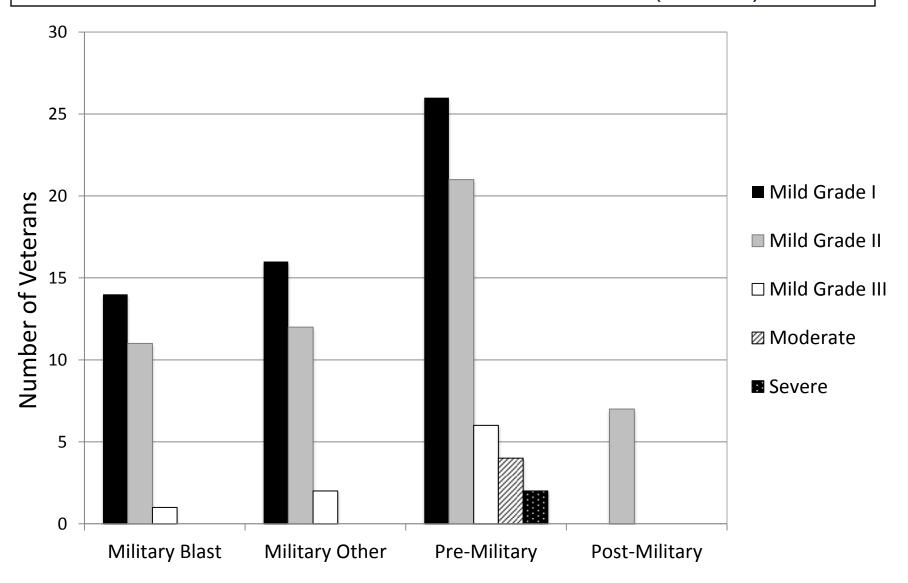
Demographics/Deployment Information BAT-L Validation from TRACTS Cohort (n=131)

Gender	85% male 15% female
Age	33.9 years (9.22) Range: 20-62
Ethnicity	White/Caucasian 74.8% Hispanic/Latino 11.5% American Indian 1.5% Asian 2.3% Black/African American 8.4%
Years of Education	13.7 (1.80) Range: 12-20
Number of Deployments	1.26 (0.48) Range: 1-3
Duration of Deployments (months)	13.4 (7.18) Range: 3 - 38
Time since last Deployment (months)	33.8 (24.3) Range: 1-99

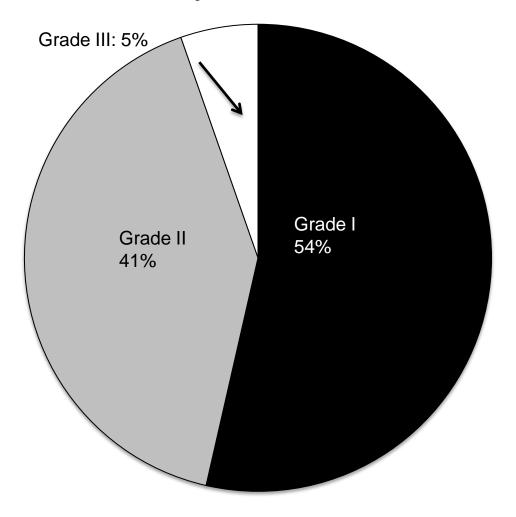
Blast Exposures

	<10 meters	11-25 meters	26-100 meters	Total Blast within 100 meters
Number of Service	42	50	91	101
Members Exposed	(32%)	(38%)	(69%)	(77%)
Mean Blasts/Service	.70	1.8	11.5	14.0
Member (SD)	(1.50)	(4.74)	(47.7)	(49.0)
Median Number of	0	0	1	2
Blasts/Service Member				
Range of Blasts/ Service Member	0-9	0-37	0-500	0-511

Traumatic Brain Injury in OEF/OIF Boston Assessment of TBI-Lifetime (BAT-L)



Military TBI Total



BAT-L Inter-rater Reliability

Inter-rater reliabilities were strong (all Kappa's >0.80)

TBI Diagnosis: OSU* as compared to BAT-L in 131 OEF/OIF Service Members

OSU	BAT-L (Converted to OSU Scoring)					
		1	2	3	4	5
		no TBI	mTBI Grade I	mTBI Grades II&III	Moderate TBI	Severe TBI
	1 (Improbable TBI)	42	1	0	0	0
	2 (Possible TBI)	1	32	5	0	0
	3 (mTBI)	0	0	44	1	0
	4 (Moderate TBI)	0	0	1	1	0
	5 (Severe TBI)	0	0	0	1	2

Kappa = .89, Kendall's tau-b = .95

Conclusions

The BAT-L is the first validated post-combat semi-structured clinical interview to characterize head injuries and diagnose TBIs throughout the lifespan.

Key considerations in OEF/OIF Veterans

- 1. Head injuries prior to the military must be assessed
- 2. Childhood injuries often more severe than militaryrelated injuries
- 3. TBIs acquired during OEF/OIF are far more likely to be mild in severity rather than moderate to severe
- 4. Blast exposure was a universal phenomenon (almost 80%)
- 5. Blast-related TBIs less frequent (20%)
- 6. If a blast-related TBI did occur -- it was mild

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Download the BAT-L at: http://heartbrain.com/projects.htm